

01-08

**POLITICAL COMMITTEE'S
REPORT OF RECEIPTS AND DISBURSEMENTS**

Name of Committee Leonard Bentz
Address of Committee 13408 Damon Ct. Biloxi, MS 39532
Fax _____ E-mail _____ Website _____
Name of Director Leonard Bentz Telephone 800-356-6429
Name of Treasurer Leonard Bentz Telephone 11



TYPE OF REPORT

- ____ April 29, 2009 Pre-Election Report (January 1, 2009, through April 25, 2009).....All Primary Committees
____ May 12, 2009 Pre-Runoff Report (April 26, 2009, through May 9, 2009)Runoff Committees Only
____ May 26, 2009 Pre-Election Report (April 26, 2009, through May 23, 2009)All General Committees
____ June 09, 2009 Pre-Runoff Report (May 24, 2009, through June 6, 2009).....Runoff Committees Only
☒ January 29, 2010 Annual Report (January 1, 2009, through December 31, 2009).....All Candidates and
Political Committees
____ Termination Report (Political Committee will no longer accept contributions or make
campaign expenditures and has no outstanding campaign debt or obligations.) Required to terminate
reporting obligations

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the political committee shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a political committee files a termination report, annual and periodic reports must continue to be filed in accordance with Miss. Code Ann. §23-15-807 (b)(ii) and (iii)(1972).
- (3) The appropriate office must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.
- (4) Contributions to political committees in excess of \$200 received after the reporting period but more than 48 hours before 12:01 a.m. on the day of the election must be reported by FAX or otherwise within 48 hours of the contribution. Use separate form "48 Hour Report" to report such activity.
- (5) This form should not be used by judicial candidates or their political committees. Candidates for judicial office must use Form SS 00-01 (Authorized Judicial Political Committee's Report of Receipts and Disbursements).

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	This Period	Calendar year-to-date
Total amount of contributions (itemized + non-itemized)	\$ <u>2900.00</u>	\$ <u>2900.00</u>
Total amount of disbursements (itemized + non-itemized)	\$ <u>0</u>	\$ <u>0</u>
Total amount of cash on hand	\$ <u>7732.31</u>	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Signature of Treasurer or Director

Date

01-29-08

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Political Committees associated with statewide or multi-county elections return form to
Delbert Hosemann, Secretary of State, Elections Division, PO Box 136, Jackson, MS 39205 or fax to 601-359-1499.
2. Political Committees associated with single county elections should return this form to their county Circuit Clerk.

Name of Candidate or Committee Leonard BentzReporting period Jan 2008 through Dec 2008

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>NuCor Pac</u>		<u>06/24/08</u>	\$ <u>500.00</u>
Mailing Address <u>3630 4th St</u>		___/___/___	\$
City, State, Zip Code <u>Flowood, MS 39232</u>		___/___/___	\$
Name of Employer (Required)		___/___/___	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>500.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name		___/___/___	\$
Mailing Address		___/___/___	\$
City, State, Zip Code		___/___/___	\$
Name of Employer (Required)		___/___/___	\$
Occupation (Required)		Aggregate year-to-date	\$
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name		___/___/___	\$
Mailing Address		___/___/___	\$
City, State, Zip Code		___/___/___	\$
Name of Employer (Required)		___/___/___	\$
Occupation (Required)		Aggregate year-to-date	\$
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name		___/___/___	\$
Mailing Address		___/___/___	\$
City, State, Zip Code		___/___/___	\$
Name of Employer (Required)		___/___/___	\$
Occupation (Required)		Aggregate year-to-date	\$